STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s)	James J. Biand	co, Jr.; Adam Sc	hmidt; Karen Soucy;	Kathy Corey Fox
II. Name of lobbyist's	partnership, firm o	r corporation, if any	:	
Bianco Profess	sional Associatio	n		
(Name	e of partnership, firm or	corporation)		· · · · · · · · · · · · · · · · · · ·
18 Centre Stre	et	Concord	NH	03301
Business Address: (Stre	et)	(Town/City)	(State)	(Zip Code)
(603) 225-7170 (Telephone)	(60	3) 226-0165 (Fax)	e-mail_attys@	biancopa.com
HI. This statement cov reportable expense tra				nay file a separate report for
X All reportable trans	actions occurring in t	he months prior to the	e reporting date relative to t	he following client:
NH Dental Socie				
	(Full Name of Client a	s it appears on the Lobb	yist Registration Form)	· · · · · · · · · · · · · · · · · · ·
<u>OR</u>				e v. 11 t 12 1
 ☐ All reportable transa unrelated to any particular 		t (including the lobby	vist's family), or the lobbying	ng firm listed below which are
IV. Date of Report Reports cover: activit	April 26, 2017 []	tion to 3/31/17	July 26, 2017 activity from 4/1/17 to 6/30/1	7
a d	October 25, 2017 [activity from 7/1/17 to 9		January 31, 2018 X activity from 10/1/17 to 12/3	1/17
V. There have been If this box is checked, c Concord, NH 03301.	no fees received a complete just this form	nd no reportable t n and submit it to the	ransactions made since Secretary of State's Office,	the last report. State House, Room 204.
VI. Check if additions	al ranarte ara attach	ed·		
	-		e Addendum A– Fees and I	Expenses
	n honorarium or reiml		must file Addendum B-R	
-		de political contribut	ions, you must file Addend	lum C-Political Contributions
Sworn Statement/Affiliation I have read RSA 15, Ri and complete to the beautiful to the bea	SA 15-B/RSA 14-C :	and RSA 664 and her	eby swear or affirm that the	e foregoing information is true
and complete to the be		- Control	1/24/18	
(Signature of lobbyist)	F		(D	RECEIVED
James J. Bianc				• •
(Print Name of lobbyi	st)			JAN 3 0 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) James J. Bianco, Jr., Adam Schmidt, Karen S	Soucy, Kathy Corey Fox
II. Name of lobbyist's partnership, firm or corporation, if any:	
Bianco Professional Association	
(Name of partnership, firm or corporation)	
III. Name of Client New Hampshire Dental Society	Date 01/24/2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greened reduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 33,160 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ _40,493
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$_3,667
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reffees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office eximitively individual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm a gagregate total of all expenses pairs persons; (b) the aggregate total of alle: meals purchased during a business st than \$10 that is given to the person ad with a value of \$25.00 or less); an orting period of greater than \$25.00 for the person of greater than \$25, purchase of the er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported.	a) \$11,000
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$11,000
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$33,160
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
	01/24/2018
(Signature of lobbyist)	(Date)
James J. Bianco, Jr.	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation Name of Client (leave blank if Statement is for the particular client): NH Dental Society	Bianco Professional Association partnership, firm, or corporation and not related to any
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 □ Oc	tober 25, 2017 □ January 31, 2018 🛚
I have read RSA 15, RSA 15-B, RSA 664, the Stathe following Addendums submitted with that Statubnitted):	atement of Income and Expenses described above, and atement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing inform complete to the best of my knowledge and belief. (Signature of lobbyist)	ation on the Statement and each Addendum is true and $\frac{1/29/15}{\text{(Date)}}$
Adam Schmidt	_
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnersh	ame of Lobbying partnership, firm, or corporation: Bianco Professional Association				
			corporation and not related to any		
particular client): NH Den	tal Society				
Date of Report (check one):					
April 26, 2017 □ Jul	y 26, 2017 🗆	October 25, 2017 □	January 31, 2018		
I have read RSA 15, RSA 1: the following Addendums submitted):	5-B, RSA 664, th ubmitted with the	ne Statement of Income an at Statement (insert the nu	d Expenses described above, and imber of Addendum forms being		
Addendum A(s).					
Addendum B(s).					
Addendum C(s).					
I hereby swear or affirm that complete to the best of my k			nt and each Addendum is true and		
(Signature of lobbyish)			1/24/18 (Date)		
Karen Soucy					
(Print Name of lobbyist)					

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Staten	nent/Aff	firma	tion	by I	Lobbyist
Statem	ent of	Income	and	Expe	enses	for:

Name of Lobbying partnersl	f Lobbying partnership, firm, or corporation: Bianco Professional Association				
			corporation and not related to any		
particular client): NH Der	ntal Society				
Date of Report (check one).					
April 26, 2017 □ Ju	iy 26, 2017 🗆	October 25, 2017 □	January 31, 2018		
I have read RSA 15, RSA the following Addendums submitted):	5-B, RSA 664, th submitted with tha	e Statement of Income and Statement (insert the nu	d Expenses described above, and umber of Addendum forms being		
Addendum A(s).					
Addendum B(s).					
Addendum C(s).					
I hereby swear or affirm the complete to the best of my l			nt and each Addendum is true and		
(Signature of lobbyist)	my Fox		(Date)		
Kathy Corey Fox					
(Print Name of lobbyist)					